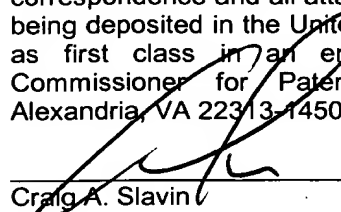
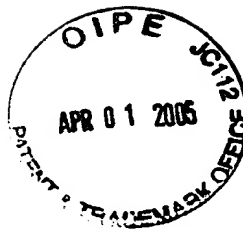


I certify that on 3/28/05, which is the date I am signing this certificate, this correspondence and all attachments mentioned are being deposited in the United States Postal Service as first class in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.


Craig A. Slavin



PATENT

Applicant: Mitev

Serial No.: 09/933,220

Filing Date: August 20, 2001

Title: User Interface Including Multifunction Fingerprint Roller And Computer Including The Same

Group Art Unit: 2623

Examiner: Kim

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Mail Stop – After Final

AMENDMENT IN RESPONSE TO THE FINAL OFFICE ACTION

DATED FEBRUARY 17, 2005

Sir:

In response to the Final Office Action dated February 17, 2005, please amend the above-identified application as follows:

Amendments to the specification begin on page 2 of this paper.

Amendments to the claims are reflected in the listing of claims which begins on page 3 of this paper.

Remarks begin on page 8 of this paper.

APR 01 2005

IN THE
UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor(s): Mitev Mitko et al.

Confirmation No.:

Application No.: 09/933,220

Examiner: Kim

Filing Date: Aug. 20, 2001

Group Art Unit: 2623

Title: USER INTERFACE INCLUDING MULTIFUNCTION FINGERPRINT ROLLER AND
COMPUTER INCLUDING THE SAME

Mail Stop AF
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL LETTER FOR RESPONSE/AMENDMENT

Sir:

Transmitted herewith is/are the following in the above-identified application:

- (X) Response/Amendment () Petition to extend time to respond
() New fee as calculated below () Supplemental Declaration
(X) No additional fee
() Other: (fee \$)

CLAIMS AS AMENDED BY OTHER THAN A SMALL ENTITY						
(1) FOR	(2) CLAIMS REMAINING AFTER AMENDMENT	(3) NUMBER EXTRA	(4) HIGHEST NUMBER PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEES
TOTAL CLAIMS	24	MINUS	29	= 0	X \$50	\$ 0
INDEP. CLAIMS	3	MINUS	3	= 0	X \$200	\$ 0
[] FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM					+ \$360	\$ 0
EXTENSION FEE	1ST MONTH \$120.00	2ND MONTH \$450.00	3RD MONTH \$1020.00	4TH MONTH \$1590.00		\$ 0
OTHER FEES						\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$ 0

Charge \$ 0 to Deposit Account 08-2025. At any time during the pendency of this application, please charge any fees required or credit any overpayment to Deposit Account 08-2025 pursuant to 37 CFR 1.25. Additionally please charge any fees to Deposit Account 08-2025 under 37 CFR 1.16 through 1.21 inclusive, and any other sections in Title 37 of the Code of Federal Regulations that may regulate fees. A duplicate copy of this sheet is enclosed.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313-1450.

Date of Deposit: Mar. 28, 2005

Typed Name: Craig A. Slavin

Signature:

Respectfully submitted,

Mitev Mitko et al.

By

Craig A. Slavin

Attorney/Agent for Applicant(s)

Reg. No. 35,362

Date: Mar. 28, 2005